



CASE

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SWASTIK

MULTISPECIALITY HOSPITAL

Mohna Road, Opp. Dena Bank, Ballabgarh

0129-2303438

E-Mail : swastikhospitalfaridabad@gmail.com

INDOOR FILE

Bed No.	
Regd. No.	
OPD No.	
IPD No.	5865
D.O.A.	25/2/24 9:
D.O.D.	

Patient's Name B/o Jitendarsi

SW/D of Mrs. Harish Age 15 Days Sex M

Occupation Marital Status

Address Vill - Chawla Colony (BLP)

Phone No.

Consultant Incharge Dr. Pawan Relation Father



CASE

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Patient Name: Baby of JITENDRI
 Referred By: Dr. SWASTIK MULTISPECIALITY HOS.
 Age / Sex: 15 days / M
 Date: 26/02/2024
 Reported on: 26/02/2024 11:56 AM
 Reg. no. 67321
 Collected on: 26/02/2024



HAEMATOLOGY COMPLETE BLOOD COUNT (CBC)

TEST	VALUE	UNIT	REFERENCE
Hemoglobin	L 9.9	g/dl	17 - 23
Total Leukocyte Count	H 18,400	cumm	4,000 - 11,000
Differential Leucocyte Count			
Neutrophils	60	%	40 - 80
Lymphocyte	35	%	20 - 40
Eosinophils	03	%	1 - 6
Monocytes	02	%	2 - 10
Basophils		%	< 2
Platelet Count	4.17	lakhs/cumm	1.5 - 4.5
Total RBC Count	L 3.4	million/cumm	4.5 - 5.5
Hematocrit Value, Hct	L 31.8	%	40 - 50
Mean Corpuscular Volume, MCV	93.5	fL	83 - 101
Mean Cell Haemoglobin, MCH	29.1	Pg	27 - 32
Mean Cell Haemoglobin CON, MCHC	L 31.1	%	31.5 - 34.5
Mean Platelet Volume, MPV	9.1	fL	6.5 - 12
R.D.W. - SD	41.8	fL	39 - 46
R.D.W. - CV	H 17.8	%	11.6 - 14

BIOCHEMISTRY

Anil Kumar
M.Sc. Microbiology
Lab Incharge

Dr. Kamal Sathyarthi
M.B.B.S. D.C.P. (Senior Pathologist)
Reg. No. - MCI - 25147

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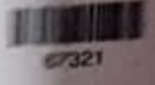


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Patient Name: Baby of JITENDRI
 Ordered By: Dr. SWASTIK MULTISPECIALITY HOSP.
 Reg. no. 67321
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Age / Sex: 15 days / M
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LIVER FUNCTION TEST (LFT)

TEST	VALUE	UNIT	REFERENCE
Total Bilirubin	0.56	mg/dl	up to 10
Direct Bilirubin	0.23	mg/dl	0 - 0.3
Indirect Bilirubin	0.33	mg/dl	0.2 - 1
AST	22.2	U/l	0 - 37
ALT	27.8	U/l	13 - 40
Alkaline Phosphatase	156.7	U/l	100-250
Protein	6.6	g/dl	3.2 - 5.4
Albumin	4.1	g/dl	1.8 - 3.6
	2.50	g/dl	1.1 - 2.1
	1.64		

KIDNEY FUNCTION TEST (KFT)

	VALUE	UNIT	REFERENCE
	H 45.86	mg/dl	7.8 - 20
	98.2	mg/dl	10-50
	H 2.0	mg/dl	0.6 - 1.4
	4.2	mg/dl	3.5 - 7.2
	145.6	mmol/L	130 - 180
	4.9	mmol/L	3.2 - 5.7
	49.10		
	22.93		

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SEROLOGY & IMMUNOLOGY

	VALUE	UNIT	REFERENCE
Protein, CRP (Quantitative)	H 49.2	mg/dl	< 6.0 mg/L

--- End of report ---

Dr. Kamal Sathyarthi
 M.B.B.S. D.C.P. (Senior Pathologist)
 Reg. No. - MCI - 25147



Hospital Recommendation letter

Date: 28/02/2024

Name of the child:- Baby Of Jitendri

Age:- 15 Days

Gender: Male

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Medical Diagnosis: TAGA/M/EOS /LBW/AKI/Respiratory failure

Suggested treatment:Medical/surgical management with respiratory support


Proposed date of Surgery/Treatment: Upto 2 wks

Estimated cost of treatment (with break ups): Rs 200000/-

This is to certify that the above referred case is critically ill. The child requires support for medical treatment expense. We here by recommend you this case for financial assistance. The above mentioned estimate is approximation for surgery/treatment and in the event of any complications the expenses may exceed the estimated cost.

From;

Signature:


Dr. PAVAN KUMAR SHARMA
M.B.B.S., D.C.H. (M.D.)
Reg. No. HN-7303

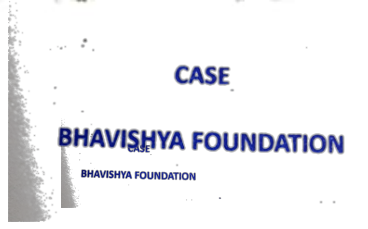
Name of Medical Practitioner: Dr. Pawan Kumar Sharma

Designation: Consultant Paediatrics

Department: Paediatrics

क्रमांक - 29/04/24
सेवा से

फाउंडर महोदय
भविष्य फाउन्डेशन
जर्द दिल्ली
सर



मेरे हरीस बच्चे का पिता आपसे निवेदन करता
हूँ कि हमारा बच्चा जो कि 15 दिनों का है
स्वास्तिक अस्पताल में गमती है हमारे बच्चे का इलाज
का खर्चा बहुत ही ज्यादा है हम आपकी संस्था से
बिगती करते हैं कि हमारे बच्चे का इलाज में
थपा संभव मदद करें। हमारा परिवार बहुत ही गरीब
है कृपया आर्थिक रूप से सहायता प्रदान करें। हमारा
पूरा परिवार जीवनभर आपका कर्जगी रहेगा।
कृपया करके थपासंभव आर्थिक
रूप से हमारे बच्चे को सहायता प्रदान करें।

प्राणी पिता
हरीस

गोपाल

Refer to Bhavishya Foundation


DR. PAWAN KUMAR SHARMA
M.B.B.S., D.C.H., D.M.D.
Reg. No. HN-7303